

POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM	Application Number	08/838,486
	Filing Date	April 7, 1997
	First Named Inventor	Steinunn Baekkeskov
	Title	METHODS FOR THE DIAGNOSIS & TREATMENT OF DIABETES
	Art Unit	1644
	Examiner Name	Gerald Ewoldt
	Attorney Docket Number	2307AA-031220US

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

☒ Practitioners associated with the Customer Number:

20350

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☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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I am the:

☐ Applicant/Inventor.

☒ Assignee of record of an undivided interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Signature	<i>Joel B. Kirschbaum</i>	Date	3/5/08
Name	Joel B. Kirschbaum	Telephone	415-353-4462
Title and Company	Director - OTM The Regents of the University of California		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

Attorney Docket No.: 2307AA-031220US
Power of Attorney submitted March 5, 2008

I am the:		
<input type="checkbox"/> Applicant/Inventor.		
<input checked="" type="checkbox"/> Assignee of record of an undivided interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).		
SIGNATURE of Applicant or Assignee of Record		
Signature	<i>Dorothy K. Robinson</i>	Date <i>March 7, 2007</i>
Name	<i>Dorothy Robinson</i>	Telephone <i>203-432-4949</i>
Title and Company	<i>Vice President & General Counsel</i> Yale University	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.		
<input checked="" type="checkbox"/> *Total of <u>1</u> forms are submitted.		

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